



SECURITIES AND BUSINESS REGULATION
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(404) 656-3920
<http://www.sos.state.ga.us/securities/>

KAREN HANDEL
Commissioner of Securities

DESIGNATED SALESMAN TRAINING CERTIFICATION
Georgia Securities Act of 1973, as amended
O.C.G.A. §10-5-3(d) and Rule 590-4-2-.15

ROBERT D. TERRY
Assistant Commissioner of Securities

1. NAME & MAILING ADDRESS OF THE INDIVIDUAL APPLICANT		
2. APPLICANT'S CRD NUMBER		
3. TELEPHONE NUMBER		
4. NAME & MAILING ADDRESS OF THE DESIGNATED DEALER		
5. DEALER'S CRD NUMBER		
6. NAME OF THE DEALER'S COMPLIANCE OFFICER		
7. TELEPHONE NUMBER		
8. CHECK NUMBER OF \$20.00 FILING FEE	CHECK #:	
9. EXECUTION AND ACKNOWLEDGEMENTS. We, the undersigned, for the purpose of complying with the Georgia Securities Act of 1973, as amended, certify that the applicant named herein is in compliance with said Act and has completed or has begun and will complete, prior to offering and selling designated securities within or from Georgia, a four month period of training with the designated dealer named above. The designated dealer and the applicant acknowledge that such training included, or will include, the definitions of accredited investor, designated security, blank check offering, designated dealer and established customer [See O.C.G.A. §10-5-2(a)]; the required contents of trade confirmations [See O.C.G.A. §10-5-3(p)]; suitability of customer accounts [See O.C.G.A. §10-5-12(m) (2)]; required risk disclosure document [See O.C.G.A. §10-5-12(m) (3)]; customer right of rescission [See O.C.G.A. §10-5-12(m) (4)]; required account statement disclosure [See O.C.G.A. §10-5-12(m) (5)]; compensation limits [See O.C.G.A. §10-5-12(n)]; representations as to market price [See O.C.G.A. §10-5-12(o)]; the anti-fraud provisions of O.C.G.A. §10-5-12; the requirement for designated securities to be listed on an approved quotation system [See O.C.G.A. §10-5-12(p)]; civil liability [See O.C.G.A. §10-5-14(h)]; and the criminal penalties for willful violations of the Act [See O.C.G.A. §10-5-24]. The undersigned represents that the information and statements contained herein are true and complete.		
10. NAME AND TITLE OF AUTHORIZED OFFICIAL		
11. SIGNATURE		DATE:
12. NAME AND TITLE OF APPLICANT		
13. SIGNATURE		DATE:
FOR OFFICE USE ONLY		
FILING DATE: _____	CODE: _____	DOCKET #: _____
EXAMINER: _____	FEE: \$ _____	COMPLETED: _____